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<b>Application Data Sheet 37 CFR 1.76</b>		<b>Attorney Docket Number</b>	53909.830003.US0
		<b>Application Number</b>	
<b>Title of Invention</b>	A HINGE		
<p>The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following form contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76.</p> <p>This document may be completed electronically and submitted to the Office in electronic format using the Electronic Filing System (EFS) or the document may be printed and included in a paper filed application.</p>			

### Secrecy Order 37 CFR 5.2

☐ Portions or all of the application associated with this Application Data Sheet may fall under a Secrecy Order pursuant to 37 CFR 5.2 (Paper filers only. Applications that fall under Secrecy Order may not be filed electronically.)

### Applicant Information:

Applicant 1				
<b>Applicant Authority</b> <input checked="" type="checkbox"/> Inventor		<input type="checkbox"/> Legal Representative under 35 U.S.C. 117		<input type="checkbox"/> Party of Interest under 35 U.S.C. 118
<b>Prefix</b>	<b>Given Name</b>	<b>Middle Name</b>	<b>Family Name</b>	<b>Suffix</b>
	Benny		Karlsson	
<b>Residence Information (Select One)</b>		<input type="checkbox"/> US Residency <input checked="" type="checkbox"/> Non US Residency <input type="checkbox"/> Active US Military Service		
<b>City</b>	<b>State/Province</b>	<b>Country of Residence</b>		
Citizenship under 37 CFR 1.41(b) i		Swedish		
<b>Mailing Address of Applicant:</b>				
<b>Address 1</b>		Nygårdsgatan 12		
<b>Address 2</b>		S-633 58		
<b>City</b>	ESKILSTUNA	<b>State/Province</b>		
<b>Postal Code</b>		<b>Country</b>	Sweden	
All Inventors Must be Listed – Additional Inventor Information Blocks may be generated within this form by selecting the Add button.				
				<input type="button" value="Add"/>

### Correspondence Information:

Enter either the Customer Number or complete the Correspondence Information section below.  
For further information see 37 CFR 1.33(a).

☐ An address is being provided for the correspondence information of this application.

<b>Customer Number</b>	26582		
<b>Email Address</b>	doCKET@holiandhart.com	<input type="button" value="Add Email"/>	<input type="button" value="Remove Email"/>

### Application Information

<b>Title of Invention</b>	A HINGE		
<b>Attorney Docket Number</b>	53909.830003.US0	<b>Small Entity Status Claimed</b>	<input type="checkbox"/>
<b>Application Type</b>	UTL		
<b>Subject Matter</b>			
<b>Suggested Class (if any)</b>		<b>Sub Class (if any)</b>	
<b>Suggested Technology Center (if any)</b>			
<b>Total Number of Drawing Sheets (if any)</b>	12	<b>Suggested Figure for Publication (if any)</b>	

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		<b>Application Number</b>	
<b>Title of Invention</b>	A HINGE		

<b>Publication Information:</b>	
<input type="checkbox"/>	Request for Early Publication (Fee required at time of Request 37 CFR 1.219)
<input type="checkbox"/>	Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122 (b) and certify that the invention disclosed in the attached application has not been and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.

### Representative Information:

Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number will be used for the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.

<b>Please Select One:</b>	<input checked="" type="checkbox"/> Customer Number	<input type="checkbox"/> US Patent Practitioner	<input type="checkbox"/> US Representative (37 CFR 11.9)
<b>Customer Number</b>	26582		

### Domestic Priority Information:

This section allows for the applicant to claim benefit under 35 U.S.C. 119(c), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119 (e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)(4), and need not otherwise be make part of the specification.

<b>Prior Application Status</b>			<b>Remove</b>
<b>Application Number</b>	<b>Continuity Type</b>	<b>Prior Application Number</b>	<b>Filing Date (YYYY-MM-DD)</b>
Additional Domestic Priority Data may be generated within this form by selecting the Add Button:			

### Foreign Priority Information:

This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a)

			<b>Remove</b>
<b>Application Number</b>	<b>Country  </b>	<b>Parent Filing Date (YYYY-MM-DD)</b>	<b>Priority Claimed</b>
PCT/SE2005/000169	WO	2005-02-09	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
0400261-4	SE	2004-02-09	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Additional Foreign Priority Data may be generated within this form by selecting the Add button.			

### Assignee Information:

Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.

#### Assignee 1


If the Assignee is an Organization check here.	<input checked="" type="checkbox"/> ASSA AB
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<b>Application Data Sheet 37 CFR 1.76</b>	Attorney Docket Number	53909.830003.USO
	Application Number	
Title of Invention		
A HINGE		

Prefix	Given Name	Middle Name	Family Name	Suffix

<b>Mailing Address Information:</b>				
Address 1	Box 371			
Address 2	S-631 05			
City	ESKILSTUNA	State/Province		
Country	Sweden	Postal Code		
Phone Number		Fax Number		
Email Address				
Additional Assignee Data may be generated within this form by selecting the Add button.				

**Signature:**

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.					
Signature			Date (YYYY-MM-DD)	2006-07-21	
First Name	Brian	Last Name	Kinnear	Registration Number	43,717

This collection of information is required by 37 CFR 1.76. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 23 minutes to complete, including gathering, preparing, and submitting the completed application data sheet form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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